

Marsh & McLennan, Incorporated
600 "B" Street Suite 648
San Diego, California 92101
Telephone 714 234-0213

June 28, 1982

RECEIVED
JUL 9 10 00 AM '82
DEPARTMENT
ENVIRONMENTAL QUALITY

Larry Crane
IOWA DEPARTMENT OF ENVIRONMENTAL QUALITY
Hazardous Waste Section
Henry A. Wallace Building
East 9th & Grand
Des Moines, Iowa 50319

EPA ID# IAD073489288
CERTIFICATE OF INSURANCE

Dear Larry:

We are enclosing three Certificates of Insurance evidencing coverage as follows:

- (1) Liability for Hazardous Waste Facility (sudden & accidental pollution)
 - (a) \$250,000 each occurrence and annual aggregate;
 - (b) \$750,000 each occurrence and annual aggregate excess of \$250,000 each occurrence and annual aggregate;
 - (c) \$2,000,000 each occurrence and annual aggregate excess of \$1,000,000 each occurrence and annual aggregate.

Very truly yours,

Stanford F. Hartman, Jr.

Stanford F. Hartman, Jr.
Account Executive

SFH/ig
Enclosures

cc:



R00330129
RCRA RECORDS CENTER

RECEIVED

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DEPARTMENT
ENVIRONMENTAL QUALITY

HAZARDOUS WASTE FACILITY CERTIFICATE OF LIABILITY INSURANCE

1. Protective National Insurance Company, (the "Insurer"), of 105 South 17th Street, Omaha, Nebraska, hereby certifies that it has issued liability insurance covering bodily injury and property damage to Norplex Division, UOP, Inc. (the "insured"), of P.O. Box 445, N.E. County Road, Postville, Iowa, in connection with the insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at EPA Identification Number IAD073489288 Norplex Division, P.O. Box 445, N.E. County Road, Postville, IA 52162 for sudden and accidental occurrences. The limits of liability are \$750,000 each occurrence and annual aggregate excess of \$250,000 each occurrence and annual aggregate, exclusive of legal defense costs. The coverage is provided under policy number XGL1805582 issued on 4/1/82. The effective date of said policy is 4/1/82.

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

(b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147(f) or 265.147(f).

(c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.

(d) Cancellation of the insurance, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

(e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151(j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.


Stanford Hartman

Account Executive, Authorized Representative for Protective National Insurance Company
Marsh & McLennan, Inc.
600 "B" Street, Suite 648
San Diego, California 92101

JUL 9 10 00 AM '82

DEPARTMENT
ENVIRONMENTAL QUALITY

HAZARDOUS WASTE FACILITY CERTIFICATE OF LIABILITY INSURANCE

1. Fidelity & Casualty Insurance Company, (the "Insurer"), of 100 Pine Street, San Francisco, California, hereby certifies that it has issued liability insurance covering bodily injury and property damage to Norplex Division, UOP, Inc. (the "insured"), of P.O. Box 445, N.E. County Road, Postville, Iowa, in connection with the insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at EPA Identification Number IAD073489288, Norplex Division, P.O. Box 445, N.E. County Road, Postville, Iowa 52162 for sudden and accidental occurrences. The limits of liability are \$250,000 each occurrence and annual aggregate, exclusive of legal defense costs. The coverage is provided under policy number SRL3634953 issued on 4/1/82. The effective date of said policy is 4/1/82.

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

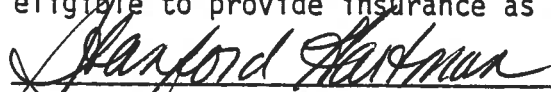
(b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147(f) or 265.147(f).

(c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.

(d) Cancellation of the insurance, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

(e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151(j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.



Stanford Hartman

Account Executive, Authorized Representative for Fidelity & Casualty Insurance Company

Marsh & McLennan, Inc.

600 "B" Street, Suite 648

San Diego, California 92101

HAZARDOUS WASTE FACILITY CERTIFICATE OF LIABILITY INSURANCE

1. International Insurance Company, (the "Insurer"), c/o L.W. Biegler, 233 South Wacker, Chicago, IL, hereby certifies that it has issued liability insurance covering bodily injury and property damage to Norplex Division, UOP, Inc. (the "insured"), of P.O. Box 445, N.E. County Road, Postville, IA 52162 in connection with the insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at EPA Identification Number IAD073489288 Norplex Division, P.O. Box 445, N.E. County Road, Postville, Iowa 52162 for sudden and accidental occurrences. The limits of liability are \$2,000,000 each occurrence and annual aggregate excess of \$1,000,000 each occurrence and annual aggregate, exclusive of legal defense costs. The coverage is provided under policy number 523118500-2 issued on 4/1/82. The effective date of said policy is 4/1/82.

2. The Insurer further certifies the following with respect to the insurance describe in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

(b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147(f) or 265.147(f).

(c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.

(d) Cancellation of the insurance, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

(e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151(j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.


Stanford Hartman

Account Executive, Authorized Representative for International Insurance Company
Marsh & McLennan, Inc.
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